FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2015 JUL 31 ⬥ℳ⬥ Office Use Only: 47

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

R E S O U N D I N G   B O O K S   P A C

ADDRESS (number and street) ▼

1 2 1 3   N   S h e r m a n   A v e

Check if different than previously reported. (ACC)

3 5 6

M a d i s o n   W I   5 3 7 0 4 -

2. **FEC IDENTIFICATION NUMBER ▼**   CITY ▲   STATE ▲   ZIP CODE ▲

C 00541631

3. IS THIS REPORT   ■ NEW (N)   OR   AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

■ July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(c) 12-Day PRE-Election Report for the:

Primary (12P)   General (12G)   Runoff (12R)

Convention (12C)   Special (12S)

Election on   M M / D D / Y Y Y Y   in the State of

(d) 30-Day POST-Election Report for the:

General (30G)   Runoff (30R)   Special (30S)

Election on   M M / D D / Y Y Y Y   in the State of

5. Covering Period   01 / 01 / 2015   through   06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer   **Kirsten E. Lombard**

Signature of Treasurer   _[signature]_   Date   07 / 29 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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